

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

0438137 AV

**DOCUMENT # P02000091512**

1. Entity Name  
**S AND J ACQUISITION CORP.**



04-23-2003 90609 001 \*\*\*450.00

Principal Place of Business  
**5030 CHAMPION BLVD SUITE 6-272**  
**BOCA RATON FL 33496**

Mailing Address  
**5030 CHAMPION BLVD SUITE 6-272**  
**BOCA RATON FL 33496**



2. Principal Place of Business  
**2200 CORPORATE BOULEVARD**

3. Mailing Address  
**2200 CORPORATE BOULEVARD**

Suite, Apt. #, etc.  
**SUITE 314**

Suite, Apt. #, etc.  
**SUITE 314**

☒ CHECK HERE IF MAKING CHANGES

City & State  
**BOCA RATON, FLORIDA**

City & State  
**BOCA RATON, FLORIDA**

4. FEI Number  
**11-3649622**

Applied For  
☐ Not Applicable

Zip  
**33431**

Country  
**USA**

Zip  
**33431**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D CROWLEY, DENNIS**  
STREET ADDRESS **5030 CHAMPION BLVD SUITE 6-272**  
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **2200 CORPORATE BOULEVARD, SUITE 314**  
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
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TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
*Dennis Crowley* **4/21/03 (561) 999-9011**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)